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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines New York Life Insurance Company Political Action Committee 51 Madison Ave. ADDRESS (number and street) Room 1109 Check if different than previously New York NY 10010 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00158881 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Χ Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 02 0 1 2006 02 28 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. John Creegan Type or Print Name of Treasurer Electronically Filed by John Creegan 03 20 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Report Covering the Period: From:		To: 0 2 2 8 2 0 0
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1 Y2006 Y2006		352517.78
(b) Cash on Hand at Begining of Reporting Period	375405.47	
(c) Total Receipts (from Line 19)	53621.59	110543.33
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	429027.06	463061.11
Total Disbursements (from Line 31)	79669.32	113703.37
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	349357.74	349357.74
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

New York Life Insurance Company Political Action Committee

Report Covering the Period:

From:

D D D

2006

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0 2 M

^D 2^D 8

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	3720.26	4470.26
	(ii) Unitemized	49901.33	104816.43
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	53621.59	109286.69
	· / / / /	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees		
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	53621.59	109286.69
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
0.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	1256.64
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	53621.59	110543.33
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	53621.59	110543.33

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	5.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party	0.00	0.00
3.	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	72000.00	105000.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
٠.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
:6.	Loan Repayments Made	0.00	0.00
			0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	69.32	103.37
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	69.32	103.37
	(add Lines 28(a), (b), and (c))	30.02	100.07
9.	Other Disbursements	7600.00	8600.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(1) Federal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	79669.32	113703.3
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	70000	
	from Line 31)	79669.32	113703.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	53621.59	109286.69
34. Total Contribution Refunds (from Line 28(d))	69.32	103.37
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53552.27	109183.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 23
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and Stat	tements may	not be sold or used by any perso	
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
۹.	Full Name (Last, First, Middle Initial) Mr. Michael Arnheiter			Date of Receipt
	Mailing Address 220 N Falmouth Highwa	у		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR645286
	North Falmouth	MA	02556-3102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		166.67
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:		e Year-to-Date ▼	-
	Primary General	199.79		P/R Deduction (\$166.67 Mo-
	Other (specify) ▼	0 0	266.67	nthly)
3.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Auteri			Date of Receipt
	Mailing Address 2515 Garrett Road	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR797286
	Drexel Hill	PA	19026-1010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		152.68
	Name of Employer New York Life Insurance Company	Occupation Agent	n	
	Receipt For:		e Year-to-Date ▼	7
	Primary General Other (specify) ▼		305.36	P/R Deduction (\$152.68 Monthly)
	Full Name (Last, First, Middle Initial) Mr. Stephen Bakke			Date of Receipt
•	Mailing Address 3865 Welsh Pony Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2005286
	Yorba Linda	CA	92886-7929	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.86
	Name of Employer New York Life Insurance	Occupation	n	7
	New York Life Insurance Company	Managin		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		231.86	P/R Deduction (\$76.93 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			473.21
			·	
T	OTAL This Period (last page this line number or	ıly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 23 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
$\frac{0}{2}$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi			Solicit Contributions from Such Committee.
A .	Full Name (Last, First, Middle Initial) Mr. Wayne Bragg Mailing Address 5433 Senford Avenue			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1125286
	Los Angeles	CA	90056-1028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance Company Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Managing Aggregate		P/R Deduction (\$75.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) Mr. William V. Brody Mailing Address 19 Corte Miguel			Date of Receipt
	City			
	City San Rafael	State CA	Zip Code 94903-1810	Transaction ID: PR2078286 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1100 1010	166.67
	Name of Employer New York Life Insurance Company	Occupation Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 251.67	P/R Deduction (\$166.67 Monthly)
).	Full Name (Last, First, Middle Initial) Mr. Eric B. Campbell			Date of Receipt
	Mailing Address 240 E 47th Street Apt. 22	2C		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1563286
	New York	NY	10017-2136	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.86
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify)		n Chief Distribution Officer Year-to-Date ▼ 233.86	P/R Deduction (\$76.93 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			470.53
T	OTAL This Period (last page this line number on	ly)	.	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 / 23
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persor dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Politi	ical Action	Committee	
۹.	Full Name (Last, First, Middle Initial) Mr. Jerry Coats			Date of Receipt
	Mailing Address 2945 River Bend Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1456286
	Heber Spring	AR	72543-3020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		166.67
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date ▼	-
	Primary General	39 - 3		P/R Deduction (\$166.67 Mo-
	Other (specify) ▼	0 0	251.67	nthly)
3.	Full Name (Last, First, Middle Initial) Ms. Sheila K. Davidson			Date of Receipt
	Mailing Address 280 Park Avenue S Apt.	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR659286
	New York	NY	10010-6132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		153.86
	Name of Employer New York Life Insurance	Occupation		
	Company		_aw & Corporate Administrati	<u>q</u>
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D D = divertions (#70,00 D)
	Other (specify)	0 0	225.00	P/R Deduction (\$76.93 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) Ms. Patricia Doss			Date of Receipt
	Mailing Address 23717 Rockrose Drive			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1709286
	Golden	CO	80401-9185	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.86
	Name of Employer New York Life Insurance	Occupation	1	1
	Company	Managin	-	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		230.86	P/R Deduction (\$76.93 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		>	474.39
	·		<u> </u>	
T	OTAL This Period (last page this line number on	ıly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 23
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
-			Detailed Summary Page	13 14 15 16 17
Ar	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	aress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi	cal Action	Committee	
	Full Name (Last, First, Middle Initial)			B : (B : :
٩.	Mr. Rich Garry Mailing Address 805 Batcheller Lane			Date of Receipt
	City Sioux Falls	State SD	Zip Code	Transaction ID: PR1829286
	FEC ID number of contributing		57105-6715	Amount of Each Receipt this Period
	federal political committee.	C		115.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		e Year-to-Date ▼	-
	Primary General		230.00	P/R Deduction (\$115.00 Mo-
	Other (specify) ▼	0 0	230.00	nthly)
3.	Full Name (Last, First, Middle Initial) Ms. Carrie L. Hall			Date of Receipt
	Mailing Address 8372 Agnew Valley Cour	t		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1953286
	Las Vegas	NV	89178-4827	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		166.67
	Name of Employer New York Life Insurance	Occupation	1	7
	Company Receipt For:	Agent	e Year-to-Date ▼	_
	Primary General	riggiogaio		P/R Deduction (\$166.67 Mo-
	Other (specify)	0 0	246.67	nthly)
).	Full Name (Last, First, Middle Initial) Mr. Jonathan Jaramillo			Date of Receipt
	Mailing Address 11 Turtle Ridge Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2290286
	Ridgefield	CT	06877-1060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		153.86
	Name of Employer New York Life Insurance	Occupation	٦	7
	Company Receipt For:	Svp Aggregate	e Year-to-Date ▼	-
	Primary General	7.99.094.0		P/R Deduction (\$76.93 Bi-
	Other (specify) ▼	0 0	233.86	Weekly)
s	UBTOTAL of Receipts This Page (optional)			435.53
_	OTAL This Davisd (lost same this line asserts and	l. A		
- 1	OTAL This Period (last page this line number on	ıy)		

S(CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 23	
	EMIZED RECEIPTS		or each category of the	(check only one)	
• •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Δr	y information copied from such Reports and Stateme	ente mau	not he sold or used by any person		
or	for commercial purposes, other than using the name	and add	ress of any political committee to	solicit contributions from such committee.	
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	New York Life Insurance Company Political	Action	Committee		
_	E IIII (I - E - MILIE - E - E				
۸.	Full Name (Last, First, Middle Initial) Mr. Jon Law			Date of Receipt	
	Mailing Address 5 Mann Drive			M M / D D / Y Y Y Y	
	•	State	Zip Code	Transaction ID: PR57549286	
	<u>Liverpool</u> N	VY	13088-5477	Amount of Each Receipt this Period	
	FEC ID number of contributing			120.00	
	federal political committee.				
	Name of Employer New York Life Insurance	cupation	1		
	Company	enior Pa	* * *		
		ggregate	Year-to-Date ▼		
	Primary General		240.00	P/R Deduction (\$60.00 Bi- Weekly)	
	Other (specify) ▼	1 1		(Veekly)	
	Full Name (Last, First, Middle Initial)			<u> </u>	
3.	Mr. Mark W. Pfaff			Date of Receipt	
	Mailing Address 330 Stockbridge Road	M M / D D / Y Y Y Y			
	C'tu	Otata 7to Oada			
	,	State /T	Zip Code	Transaction ID: PR584286	
		V I	05445-9356	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			153.86	
	New York Life Incurance	cupation			
	Company		ce President - Agency Year-to-Date ▼	_	
	Primary General	ggregate	Teal-10-Date ▼	P/R Deduction (\$76.93 Bi-	
	Other (specify) ▼		269.86	Weekly)	
`	Full Name (Last, First, Middle Initial)			Data of Baselint	
٠.	Ms. Anne Pollack Mailing Address 44 Gramercy Park N Apt. 9	<u> </u>		Date of Receipt	
	Mailing Address 44 Gramercy Park N Apt. 9E	U		M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR587286	
	New York N	٧Y	10010-6310	Amount of Each Receipt this Period	
	FEC ID number of contributing	,		153.86	
	federal political committee.	<u> </u>		130.00	
	Name of Employer Oc New York Life Insurance	cupation	1	1	
	New York Life Insurance Company Sv	-	ief Investment Officer		
		ggregate	Year-to-Date ▼		
	Primary General	1 1	230.80	P/R Deduction (\$76.93 Bi-	
	Other (specify)	1 1	200.00	Weekly)	
s	UBTOTAL of Receipts This Page (optional)			427.72	
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т	OTAL This Period (last page this line number only)		•		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 23 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi	cal Action	Committee	
۹.	Full Name (Last, First, Middle Initial) Mr. Oren Popper Mailing Address 1448 President Street			Date of Receipt
	City	State	Zip Code	T ID DDE4059396
	Brooklyn	NY	11213-4435	Transaction ID: PR54058286 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		166.67
	Name of Employer New York Life Insurance Company Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Agent Aggregate	e Year-to-Date ▼ 250.01	P/R Deduction (\$166.67 Monthly)
3.	Full Name (Last, First, Middle Initial) Mr. Stephen G. Ray Mailing Address 225 Montair Drive			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1588286
	<u>Danville</u>	CA	94526-3742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.86
	Name of Employer New York Life Insurance Company Receipt For:		n .P West Central Agencies e Year-to-Date ▼	
	Primary General Other (specify) ▼	riggrogate	223.86	P/R Deduction (\$76.93 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) Mr. Kulbhusan Sareen			Date of Receipt
	Mailing Address 405 Darrell Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2228286
	Hillsborough	CA	94010-6709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		160.00
	Name of Employer New York Life Insurance	Occupation Managing		
	Company Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 320.00	P/R Deduction (\$80.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			480.53
T	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 23
	EMIZED RECEIPTS		or each category of the	(check only one)
	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
^ -	information and formation Bounds and Old			13 14 15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ime and add	rnot be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Politi	cal Action	Committee	
۹.	Full Name (Last, First, Middle Initial) Mr. Curtis T. Schultz			Date of Receipt
	Mailing Address 2204 Cherokee			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1252286
	Valporaiso	IN	46383-2284	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		166.67
	Name of Employer New York Life Insurance	Occupation Agent	١	
	Company Receipt For:		Year-to-Date ▼	
	Primary General		000.07	P/R Deduction (\$166.67 Mo-
	Other (specify) ▼		266.67	nthly)
3.	Full Name (Last, First, Middle Initial) Mr. John P. Schwan			Date of Receipt
	Mailing Address 1320 N Arch	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1897286
	Aberdeen	SD	57401-2147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		166.67
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date ▼	\dashv
	Primary General	, iggi ogalo		P/R Deduction (\$166.67 Mo-
	Other (specify) ▼	0 0	250.01	nthly)
.	Full Name (Last, First, Middle Initial) Mr. B. Christopher Stokes			Date of Receipt
	Mailing Address 3657 Patuxent River Roa	.d		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR883286
	Davidsonville	MD	21035-2422	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer New York Life Insurance	Occupation	1	1
	New York Life Insurance Company	Agent		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		208.34	P/R Deduction (\$125.00 Monthly)
s	UBTOTAL of Receipts This Page (optional)		_	458.34
	1 22 (11-1-27)		<u>^</u>	
T	OTAL This Period (last page this line number on	ly)	>	

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 / 23
			Use separate schedule(s)	(check only one)
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or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Politi	cal Action	Committee	
_				
	Full Name (Last, First, Middle Initial)			Date of Boardal
٦.	Ms. Bik Yung Tsang			Date of Receipt
	Mailing Address 1974 Troy Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR700286
	Brooklyn	NY	11234-3020	Amount of Each Receipt this Period
	-		11204 0020	Amount of Each receipt this remod
	FEC ID number of contributing federal political committee.	C		166.67
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.01	P/R Deduction (\$166.67 Mo-
	Other (specify) ▼		250.01	nthly)
3	Full Name (Last, First, Middle Initial) Mr. David Walsh			Date of Receipt
-	Mailing Address 150 Vista Grande			M M / D D / Y Y Y Y
	Walling / Garage 150 Vista Grande			
	City	State	Zip Code	Transaction ID: PR86286
	Greenbrae	CA	94904-1135	Amount of Each Receipt this Period
	FEC ID number of contributing			100.07
	federal political committee.	C		166.67
	Name of Caralagas	0		_
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Voor to Data	_
	Primary General	Aggregate	Year-to-Date ▼	D/D D - 1 - 1' /0100 07 M
	Other (specify)	' '	333.34	P/R Deduction (\$166.67 Mo- nthly)
	Cure (openis) \			','
	Full Name (Last, First, Middle Initial)			
Э.	Mr. Lon G. Wilson			Date of Receipt
	Mailing Address 4240 Tahoe Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21908286
	Anchorage	AK	99502-1460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		166.67
	rederai politicai committee.			
	Name of Employer New York Life Insurance	Occupation	า	7
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	P/R Deduction (\$166.67 Mo-
	Other (specify) ▼		250.00	nthly)
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NAME OF COMMITTEE (In Full)	and address of any political co	אווווווונני	56 10 80	IIICIL COITLI	ibulions n	OIII SUCII C	,ommuee	
New York Life Insurance Company Politica	I Action Committee							
Full Name (Last, First, Middle Initial)				_		: 337587		
Committee to Elect Gary Ackerman					of Disburs		· · · · · · · · · · · · · · · · · · ·	Y
Mailing Address 3000 Marcus Ave. Suite 19				0 2		03 /	ž 0 ŏ 6	5
City Lake Success	State Zip Code NY 11042			Amou	nt of Each	n Disburse	ment this F	Period
Purpose of Disbursement	11042						1500.0	00
Contribution		011						
Candidate Name Gary L. Ackerman		Catego Type						
X	ment For: 2006 Primary General Other (specify)			Contri	bution			
Full Name (Last, First, Middle Initial)				Trono	action ID	. 227500		
3. Committee to Elect Gary Ackerman				Date o	of Disburs	: 337588 ement		Υ
Mailing Address 3000 Marcus Ave. Suite 19				0 2		ָס אַ (· · · · · · · · · · · · · · · · · ·	ž 0 ŏ 6	5
City Lake Success	State Zip Code NY 11042			Amou	nt of Each	n Disburse	ment this F	-
Purpose of Disbursement Contribution	I	011					500.0	00
Candidate Name Gary L. Ackerman		Catego	ory/					
Office Sought: X House Senate President State: NY District: 5	ment For: 2006 Primary X General Other (specify)			Contri	bution			
Full Name (Last, First, Middle Initial)				Trans	action ID	: 337634		
Back America's Conservatives PAC (BAC	PAC)			Date o	of Disburs			
Mailing Address PO Box 6623				0 2	M / D.	17 /	žοŏε	S Y
City Arlington	State Zip Code VA 22301			Amou	nt of Each	n Disburse	ment this F	Period
Purpose of Disbursement Contribution		011		L.			5000.0	00
Candidate Name	-	Catego	ory/					
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)			Contri	bution			
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State		
or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ne and address of any political committee to se	olicit contributions from such committee
New York Life Insurance Company Polit	eal Action Committee	
Full Name (Last, First, Middle Initial)		Transaction ID: 337599
People For English		Date of Disbursement
Mailing Address PO Box 1940		$\begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 0 & 2 & 0 & 0 \\ 0 & 0 & M \end{bmatrix}$
City Erie	State Zip Code PA 16507	Amount of Each Disbursement this Period
Purpose of Disbursement	1.0001	1500.00
Contribution	011	
Candidate Name Phil English	Category/ Type	
Senate President	sement For: 2006 (Primary General Other (specify)	Contribution
State: PA District: 3		
Full Name (Last, First, Middle Initial) People For English		Transaction ID: 342061 Date of Disbursement
Mailing Address PO Box 1940		$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} / \begin{bmatrix} D & 1 & 0 \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Erie	State Zip Code PA 16507	Amount of Each Disbursement this Period
Purpose of Disbursement Void Contribution of 10/20/2005	011	-1500.00
Candidate Name Phil English	Category/ Type	
Office Sought: X House Senate President State: PA District: 3	sement For: 2006 (Primary General Other (specify)	Void Contribution of 10/2- 0/2005
Full Name (Last, First, Middle Initial)		Transaction ID: 337572
C. Ensign For Senate		Date of Disbursement
Mailing Address 8917 Stafford Springs	Prive	$\begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ 0 & 3 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$
City Las Vegas	State Zip Code NV 89134	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	011	1000.00
Candidate Name John E. Ensign	Category/ Type	
X Senate President	sement For: 2006 (Primary General Other (specify)	Contribution
State: NV District: SUBTOTAL of Disbursements This Page (optional))	1000.00

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\rangle	New York Life Insurance Company Politica	al Action Committee												
— А.	Full Name (Last, First, Middle Initial)								on ID		-			
۸.	Committee to Re-Elect Vito Fossella						M	of D	isburs		nt / Y	Y	Υ	Υ
	Mailing Address 104 Hume Avenue						0 2			3		. 2	o ŏ 6	5
	City Alexandria	State Zip Code VA 22301					Amou	int o	f Each	n Disl	burser	ment	this F	Period
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	Candidate Name Vito J. Fossella				egory/ vpe									
	Senate X President	ement For: 2006 Primary General Other (specify)					Contr	ibut	ion					
	State: NY District: 13													
В.	Full Name (Last, First, Middle Initial) Hinojosa For Congress						Trans Date		on ID:					
	Mailing Address 502 North 11th Street						0 ^M 2	М	/ D	0	/ Y	ž	o ŏ 6	Y
	City Mcallen	State Zip Code TX 78501					Amou	int o	f Each	n Disl	burser	ment	this F	Period
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	Candidate Name Ruben Hinojosa				egory/ pe									
	ů A	ement For: 2006 Primary General Other (specify)					Contr	ibut	ion					
	State: TX District: 15													
C.	Full Name (Last, First, Middle Initial) Committee To Re-Elect Bobby Jindal						Trans Date		on ID:					
	Mailing Address PO Box 8628						0 ^M 2	М	/ D 1	1 ^D	/ Y	ž	o ŏ e	Y
	City Metairie	State Zip Code LA 70011					Amou	int o	f Each	n Disl	burser	ment	this F	Period
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	Candidate Name Bobby Jindal		Ca	ate	egory/ vpe									
	Senate X President	ement For: 2006 Primary General Other (specify)					Contr	ibut	ion					
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\rangle	New York Life Insurance Company Politica	al Action Committee												
Α.	Full Name (Last, First, Middle Initial)								ion ID					
Λ.	Tim Johnson For South Dakota Inc						M	of D м	isburs		nt / Y	Υ	Y	Υ
	Mailing Address PO Box 1859						0 2			3	L	2 0	ó 6	
	City Sioux Falls	State Zip Code SD 57101					Amou	ınt o	f Each	n Disl	burser	nent t	his P	eriod
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	Candidate Name Tim Johnson				egory ype	'/								
	X Senate X President	ement For: 2008 (Primary General Other (specify)					Contr	ibut	tion					
_	State: SD District:													
В.	Full Name (Last, First, Middle Initial) Sue Kelly For Congress							of D	isburs	emei				
	Mailing Address PO Box 599						0 ^M 2	М	/ D	1 0	/ Y	ž o	ó 6	Y
	City Katonah	State Zip Code NY 10536					Amou	int o	f Each	n Disl	burser			
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	Candidate Name Sue W. Kelly		Ca	ate	egory ype	"/								
	Senate X President	ement For: 2006 Primary General Other (specify)					Contr	ibut	tion					
	State: NY District: 19 Full Name (Last, First, Middle Initial)										7500			
C.	Pete King For Congress Committee						Date	of D	ion ID isburs	emei				
	Mailing Address Post Office Box 1428						0 2	М	[/] D	3	/ Y	ž o	ó 6	Y
	City Seaford	State Zip Code NY 11783					Amou	ınt o	f Each	n Disl	burser	nent t	his P	eriod
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	Candidate Name Peter T. King		Ca	ate	egory	"/								
	Office Sought: X House Senate President Disburs: X	ement For: 2006 Primary General Other (specify)	1	•	, ~~		Contr	ibut	tion					
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New York Life Insurance Company Politica	Action Committee						
Full Name (Last, First, Middle Initial)				tion ID: 337			
Larson For Congress				Disbursemer		, · · · · ·	Y
Mailing Address 29 Ruff Circle			0 2	[/] 10	2	0 0 6	
	State Zip Code CT 06033		Amount	of Each Disl	oursemen	t this Pe	eriod
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Contribution		011					
Candidate Name John B. Larson		Category/ Type					
Office Sought: X House Disburse Senate	ment For: 2006 Primary X General		Contribu	ution			
President	Other (specify) ▼						
State: CT District: 1							
Full Name (Last, First, Middle Initial) Michaud For Congress				t ion ID: 337 Disbursemer			
			M M M 0 2	03		0 0 6	Y
Mailing Address 213 Lisbon Street			0 2	0.3		.000	
•	State Zip Code ME 04240		Amount	of Each Disl	oursemen	t this Pe	eriod
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Michael Michaud		Type					
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President	Other (specify)						
State: ME District: 2	· 						
Full Name (Last, First, Middle Initial) National Leadership PAC				tion ID: 337 Disbursemer			
Mailing Address P.O. Box #5577			0 ^M 2 ^M	/ D 1 0	/ Y Y	0 0 6	Y
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	State Zip Code NY 10027		Amount	of Each Disl			-
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$ \rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica	al Action C	committee														
\mathbb{Z}	TVCW TOTA Life insurance company i onitice	ai 7 lotioii O	ommittee														
Α.	Full Name (Last, First, Middle Initial)									on ID							
A.	National Republican Campaign Committee	9							_	isburs		ent	V	V	V		
	Mailing Address 320 First Street, SE							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
	,	State DC	Zip Code 20003					Amou	nt o	f Each	ı Dis	burser	nent th	is P	erioc	<u> </u>	
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	Candidate Name			С		egory/ ype											
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_	Full Name (Last, First, Middle Initial)							Tuono		an ID	. 22	7567					
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	Mailing Address 104 Hume Avenue							0 ^M 2	М	′	3	/ Y	ž 0	ó 6	Υ		
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C.	Simmons For Congress							Trans Date		isburs							
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	Contribution			L	Q	11											
	Candidate Name Robert R. Simmons			С		egory/ ype											
	Office Sought: X House Disburse	ement For:	2006			-		Contr	ihut	ion							
		Primary	General					Conti	ibui	.1011							
	State: CT District: 2	Other (spe	ecify)														
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Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
New York Life Insurance Company Politica	al Action Committee		
Full Name (Last, First, Middle Initial) A. Sweeney For Congress			Transaction ID: 337573 Date of Disbursement
Mailing Address PO Box 1465			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D & D \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix} $
City Clifton Park	State Zip Code NY 12065		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name John E. Sweeney		Category/ Type	
Senate X President	ement For: 2006 Primary General Other (specify)		Contribution
State: NY District: 20 Full Name (Last, First, Middle Initial)			Transaction ID: 337605
B. Mike Thompson For Congress			Date of Disbursement
Mailing Address 5429 Madison Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} $
City Sacramento	State Zip Code CA 95841		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Michael Thompson		Category/ Type	
9 1	ement For: 2006 Primary General Other (specify)		Contribution
State: CA District: 1			
Full Name (Last, First, Middle Initial) C. Together for Our Majority PAC			Transaction ID: 337586 Date of Disbursement
Mailing Address P.O. Box 16488			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & Z & Q & Q & G \end{bmatrix}$
City Arlington	State Zip Code VA 22215		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	5000.00
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		Contribution
SUBTOTAL of Disbursements This Page (optional)			7000.00
TOTAL This Period (last page this line number only			72000.00

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S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 22 / 23
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	y one) 22 23 24 25 26 X 28a 28b 28c 29 30b
	y Information copied from such Reports and Sta for commercial purposes, other than using the n			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	New York Life Insurance Company Poli	ical Action Committee		
	Full Name (Last, First, Middle Initial)			Transaction ID: 342062
۹.	Mr. Anthony J. Taylor			Date of Disbursement
	Mailing Address 802 North 730 East			02 10 7 2006
	City	State Zip Code		Amount of Each Disbursement this Period
	American Fork	UT 84003-1483		
	Purpose of Disbursement Void		010	-125.00
	Candidate Name		Category/ Type	
	Office Sought: House Disbu	rsement For:		Void
	Senate	Primary General		Volu
	President State: District:	Other (specify)		
	SIME DISTRICT I			I and the second

SUBTOTAL of Disbursements This Page (optional)	•	-125.00
TOTAL This Period (last page this line number only)	•	-125.00

SCHEDULE B (FECFOIIII 3X)	Use seperate schedule(s)	FOR LINE		L PA	AGE 23/2	:3
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22	23 24 28b 28c	25 X 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						5
NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica	· · · · · · · · · · · · · · · · · · ·					
Full Name (Last, First, Middle Initial) A. Assoc. of California Life & Health Ins. Co.'s	s PAC			on ID: 337564 sbursement	2006	Y
Mailing Address 1201 K Street Suite #1820			0 2	03	2006	
,	State Zip Code CA 95814		Amount of	Each Disburse		-
Purpose of Disbursement Non-Federal Contribution		011			5600.0	00
Candidate Name		Category/ Type				
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		Non-Fede	eral Contributi	ion	
Full Name (Last, First, Middle Initial) Benoit for Assembly 2006				on ID: 337569 sbursement	ı	
Mailing Address 7111 Bettola Place			02	D 0 3 Y	Ž0Ŏ6	Y
,	State Zip Code CA 91701		Amount of	Each Disburse	ement this P	'eriod
Purpose of Disbursement Non-Federal Contribution Candidate Name		011 Category/			1000.0	00
John Benoit	ment For:	Туре	Non Fodo	eral Contributi	ion	
Senate President State: District:	Primary General Other (specify) ▼		Non-rede	Tai Contributi	ion	
Full Name (Last, First, Middle Initial) Taxpayers for Dave Cox - Senate 2008				on ID: 337568 sbursement		
Mailing Address 1014 11th Street #106			02	03	Ž006	Y
,	State Zip Code CA 95814		Amount of	Each Disburse	ment this P	'eriod
Purpose of Disbursement Non-Federal Contribution	I	011			1000.0	00
Candidate Name Dave Cox		Category/ Type				
Office Sought: X House Senate President State: District:	ment For: Primary General Other (specify)		Non-Fede	eral Contributi	ion	
SUBTOTAL of Disbursements This Page (optional) .		<u>}</u>			7600.0	0
TOTAL This Period (last page this line number only)					7600.0	0